PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000									Application or Docket Number			
CLAIMS AS EILED - DADT I												
F	OTAL CLAIM			10.1			mn 2) TYPE		LL ENTITY		OTHER THA	
_			<u> </u>	(V.)				RATE	FEE	7	RATE	FEE
FOR			NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC F	EE	OR	BASIC FE	777
L	OTAL CHARGE	EABLE CLAIMS	)/ m	minus 20=		-77		X\$ 9=		OR	X\$18=	121
<u> </u>	DEPENDENT (			ninus 3 =	. <	3		X40=	<del>                                     </del>	1	Y22	1100
М	ULTIPLE DEPE	NDENT CLAIM	PRESENT	RESENT					<del>                                     </del>	OR		<del>1240</del>
• 1	f the differenc	e in column 1 j	s less than a	less than zero, enter "0" in			L	+135=		OR	+270=	
If the difference in column 1 is less than zero, enter "0" in column 2  CLAIMS AS AMENDED - RART II								TOTAL		OR	TOTAL	1226
		(Column 1)	MINICINDE	(Column 2)				SMALL	ENTITY	OR	OTHER SMALL	RITHAN
AMENDMENT A		CLAIMS REMAINING	242	HIGHI	EST	(Column 3) PRESENT	Г		ADDI-	<b>7</b>	OMALL	ADDI-
		AFTER AMENDMENT		PREVIO	USLY	EXTRA		RATE	TIONAL FEE		RATE	TIONAL
	Total	•	Minus .	••		=		X\$ 9=	FEE		X\$18=	FEE
	Independent	•	Minus	***		=	·  -	X40=		OR		
_	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDENT	CLAIM		-	A40=,	-	OR	X80=	
							L	+135=		OR	+270=	
							AE	TOTAL DDIT. FEE		OR ,	TOTAL ADDIT, FEE	
_	(Column 1) (Column 2) (Column 3) CLAIMS (HIGHEST											. * ·
<b>-</b> > ↓	in in the state of	REMAINING AFTER	Mark Control	NUMB PREVIOL	ER	PRESENT EXTRA		RATE	ADDI- TIONAL	: [	DATE	ADDI-
	Total	AMENDMENT		PAID F		EXTRA		TIATE	FEE		RATE	TIONAL FEE
	Independent	•	Minus	**		=		X\$ 9=		OR	X\$18=	
		NTATION OF MU	Minus	***	CL AIRA	=		X40=		OR	X80=	
		,	SELLI CE DEL	CIADEIAL (	JLAIM			+135=		l t	. 270	
							L	TOTAL		OR	+270=	
		(Column 1)		(Calum)	O\	(0.1 0)	AD	DIT. FEE	L	OR ,	ADDIT. FEE	L
,	· j.	CLAIMS REMAINING	Py Aus	(Colum	ST	(Column 3)	_		455:			
	t ikang a	AFTER AMENDMENT	- 10 m	NUMBE PREVIOL PAID FO	JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
	Total	•	Minus	**	20	=	-		FEE			FEE
	ndependent	•	Minus	***		=		X\$ 9=		OR	X\$18=	
_	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	ENDENT (	CLAIM		L	X40=		OR	X80=	
. 14 .	he onterior							-135=		OR	+270=	,
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  TOTAL												
		nber Previously Pa per Previously Paid	IN FOUND IN	CONCEINE	acc then	. ^	ADI bound	DIT. FEE			DDIT. FEE <b>L</b>	